

FILED

4:30 pm, Aug 14, 2020

**U.S. DISTRICT COURT
SOUTHERN DISTRICT OF INDIANA
Roger A.G. Sharpe, Clerk**

UNITED STATES DISTRICT COURT
FOR THE 7th DISTRICT OF Indiana

Solorio Veronica

Full name of plaintiff(s)

v.

Case No. 2:20-cv-419-JRS-MJD
(Provided by the clerk of court)

Penny Elmore, William Wilson, Tommy J. Watson.

Full name of defendant(s)

**PRISONER REQUEST TO PROCEED IN DISTRICT COURT
WITHOUT PREPAYING THE FULL FILING FEE**

Answer the following questions to the best of your ability.

Note: If you do not tell the truth, the court may dismiss your lawsuit.

I. Personal Information

1) Your name: Solorio Veronica

(a) State the place of your incarceration and provide your prisoner identification number:

U.S.P. Terre Haute 16016-112
(place) (number)

(b) Are you employed at the institution? ☐ Yes ☒ No

(c) Do you receive any payment from the institution? ☐ Yes ☒ No

Attach a printout of your prison trust account statement showing transactions for the six-month period immediately preceding the filing of this request and showing the current balance of your account.

2) Do you have any dependents that you are responsible for supporting?

☐ Yes ☒ No

If "yes," list them below.

<u>Name or initials (for minor children only)</u>	<u>Relationship to You</u>	<u>Age</u>	<u>Amount of Support Provided per Month</u>
N/A			\$
			\$
			\$

II. **Property or Assets:** - If you are married, your answers must *include your spouse's property.*

1) Do you own a car?

☐ Yes ☒ No

If "yes," list the car(s) below:

<u>Make and Model</u>	<u>Year</u>	<u>Approximate Current Value</u>
N/A		\$
		\$

2) Do you own your home(s)? ☐ Yes ☒ No

If "Yes," state the approximate value(s). \$ N/A

What is the amount of equity (assessed value of residence minus outstanding mortgage balance) in the home(s)? \$

3) Do you have any cash or checking, savings, or other similar accounts?

☐ Yes ☒ No

If "Yes," state the total of such sums. \$ N/A

- 4) Do you own any other property of value, such as real estate, stocks, bonds, trusts, or individual retirement accounts (e.g., IRA, 401 k), artwork, or jewelry?

☐ Yes ☒ No

If "Yes," describe the property and the approximate value(s).

N/A

III. Litigation History

For each federal lawsuit that you recall having filed, list as much of the following information that you remember about each case: The name of the case (that is, the plaintiffs and the defendants), the case number or year of filing, and the federal district in which you filed the case. Use more paper if needed.

Case Name (Plaintiffs and defendants)	Case number (or year of filing)	Federal district
N/A		

IV. Other Circumstances - Describe any other financial circumstance(s) that you would like the court to consider when reviewing this petition.

My only available income is provided to me by my family who are
struggling themselves in this pandemic while also living without
their financial bread winner who is currently this Plaintiff in
Prison respectfully.

I, Solorio Veronica, declare that I am the plaintiff bringing this complaint. I declare that I am unable to prepay the full filing fee and that I am entitled to the relief sought in the complaint.

August 11, 2020
Date

Solorio Veronica
Signature - Signed Under Penalty of Perjury

Inmate Inquiry

Inmate Reg #: 16016112 Current Institution: Terre Haute - FCC
 Inmate Name: VERONICA, SOLORIO Housing Unit: THP-F-B
 Report Date: 08/03/2020 Living Quarters: F02-220L
 Report Time: 12:44:57 PM

[General Information](#) | [Account Balances](#) | [Commissary History](#) | [Commissary Restrictions](#) | [Comments](#)

General Information

Administrative Hold Indicator: No
 No Power of Attorney: No
 Never Waive NSF Fee: No
 Max Allowed Deduction %: 100
 PIN: 0955
 PAC #: 833959323
 Revalidation Date: 19th
 FRP Participation Status: Completed
 Arrived From: OKL
 Transferred To:
 Account Creation Date: 12/9/2001
 Local Account Activation Date: 3/10/2009 5:34:05 AM
 Sort Codes:
 Last Account Update: 8/1/2020 12:11:45 AM
 Account Status: Active
 Phone Balance: \$2.83

Pre-Release Plan Information

Target Pre-Release Account Balance: \$0.00
 Pre-Release Deduction %: 0%
 Income Categories to Deduct From: ☐ Payroll ☐ Outside Source Funds

FRP Plan Information

FRP Plan Type	Expected Amount	Expected Rate
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Account Balances

Account Balance: \$1,698.28
 Pre-Release Balance: \$0.00
 Debt Encumbrance: \$0.00
 SPO Encumbrance: \$0.00
 Other Encumbrances: \$0.00
 Outstanding Negotiable Instruments: \$0.00

Administrative Hold Balance: \$0.00
Available Balance: \$1,698.28
National 6 Months Deposits: \$880.00
National 6 Months Withdrawals: \$596.45
Available Funds to be considered for IFRP Payments: \$430.00
National 6 Months Avg Daily Balance: \$1,578.20
Local Max. Balance - Prev. 30 Days: \$1,826.08
Average Balance - Prev. 30 Days: \$1,746.41

Commissary History

Purchases

Validation Period Purchases: \$83.35
YTD Purchases: \$972.65
Last Sales Date: 7/29/2020 12:26:10 PM

SPO Information

SPO's this Month: 0
SPO \$ this Quarter: \$0.00

Spending Limit Info

Spending Limit Override: No
Weekly Revalidation: No
Bi-Weekly Revalidation: Yes
Spending Limit: \$180.00
Expended Spending Limit: \$0.00
Remaining Spending Limit: \$180.00

Commissary Restrictions

Spending Limit Restrictions

Restricted Spending Limit: \$0.00
Restricted Expended Amount: \$0.00
Restricted Remaining Spending Limit: \$0.00
Restriction Start Date: N/A
Restriction End Date: N/A

Item Restrictions

List Name	List Type	Start Date	End Date	Active
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Comments

Comments:

BP-A148.055

SEP 98

INMATE REQUEST TO STAFF**U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF PRISONS**

TO: (Name and Title of Staff Member) Mr. Weyrauch, Counsler	DATE: Aug. 1, 2020
FROM: Solorio, Veronica	REGISTER NO.: 16016-112
WORK ASSIGNMENT: N/A	UNIT: F-2

SUBJECT: (Briefly state your question or concern and the solution you are requesting. Continue on back, if necessary. Your failure to be specific may result in no action being taken. If necessary, you will be interviewed in order to successfully respond to your request.

I am in need of my financial receipts for the last 6 months to
apply for Court Fee's. Thank you.

(Do not write below this line)

DISPOSITION:

Signature Staff Member

Date

Record Copy - File; Copy - Inmate
(This form may be replicated via WP)

This form replaces BP-148.070 dated Oct 86
and BP-S148.070 APR 94

FILE IN SECTION 6 UNLESS APPROPRIATE FOR PRIVACY FOLDER

SECTION 6